

# BEST ADVICE



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## THE DRINKING/DRIVING DILEMMA

### *History, Experience, and Strategies*

*The purpose of this document is to identify the soundest conclusions which can be drawn from research and experience and to summarize the best advice which the Addiction Research Foundation can offer to those confronted with the task of developing effective strategies for the control of the drinking/driving problem.*

For both the alcohol and the criminal justice fields, the drinking/driving problem poses an unusual dilemma. From the health perspective, most people who have driven while drinking are not alcoholics or problem drinkers in the usual sense of these terms. From the criminal justice perspective, the crime, though serious, does not require any intent to cause injury or a victim. And, more people have probably been guilty of it

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(knowingly or unknowingly) than any other offence in the Criminal Code. At the same time, however, the enormous cost to society is reflected in widespread, often highly vocal, public concern. Not surprisingly, under these circumstances, a considerable body of experience has accumulated as a result of many and diverse attempts to reduce the problem. The objective of this document has been to identify the soundest conclusions which can be drawn from this experience and to summarize the best advice which the Addiction Research Foundation can offer to those confronted with the task of developing effective strategies.

Probably as long as there has been an alcoholic beverage and a mode of transportation—whether animal or motor powered—there has been a drinking/driving problem. It was in the mid-1930s, however, that Holcombe's pioneer work convincingly demonstrated that drinking drivers contributed disproportionately to motor vehicle accidents. This seems to mark the beginning of significant social concern calling for study and action. Since then, especially in Europe and America, there has been a concerted and very considerable effort to find ways to reduce the prevalence of drinking driving. Research has revealed much about the magnitude of the problem, methods of detection and quantification, the risks of an accident at different levels of alcohol in the body, which sub-groups of the driving population are at particularly high risk, and the efficacy of various countermeasures.



The most important result of this effort has been widespread prohibition of driving with high blood alcohol levels and the use of detection devices to aid enforcement. While these measures are likely to remain essential components of any control system, no countermeasure has yet been applied which results in a *lasting* reduction in alcohol-related accidents. On the other hand, it is possible to draw four conclusions from research to date which should be taken into account in the planning and implementation of any approach intended to have such an effect:

- 1. It is probable that, unless by some means driving is entirely separated from drinking, measures which increase or decrease the overall level of alcohol consumption in the population will similarly affect the prevalence of drinking driving.**

The amount of alcohol consumed in a population is influenced by the degree of social acceptance of use of and ease of access to alcohol, the latter being largely determined by the legal control system. The degree of restraint or permissiveness in government control policy is to a considerable extent dictated by social tolerance. While social tolerance may be modified by public information or other educational programs, behavioral change is apt to be minimal unless, or until, changes in the same direction occur in the control system. Thus, to achieve a *lasting* reduction in the prevalence of alcohol problems it will be necessary not only to increase public awareness of



alcohol-related hazards but also to ensure that complementary changes in control policy occur: *education efforts and control measures must be mutually reinforcing*. This view underlies the Foundation's long-term goal with respect to the prevention of alcohol problems in general, and applies as well to the drinking/driving problem.

The absence of mutual reinforcement is well illustrated by the situation in Ontario during the past 30 years. While health educators and others have sought to increase public awareness of the hazards of heavy alcohol use, and, most particularly, of those associated with drinking and driving, there has been a steady increase in accessibility of alcohol through relaxation of controls. Examples of changes which had, or could have, an adverse effect on efforts to reduce drinking driving include lowering the legal drinking age, increasing the number of licensed drinking places, liberalizing alcohol advertising, and failing to maintain the cost of alcohol relative to disposable income. Lowering the drinking age from 21 to 18 years apparently resulted in increased alcohol consumption by the age group affected, and certainly resulted in an increase in their alcohol-related accidents. Likewise, the large increase permitted in outlets licensed for on-premise consumption over the period, and the absence of restrictions on location, have resulted in taverns and other drinking places being located on or near highways. It would





seem an inescapable conclusion that such licensing encourages drinking and driving.

The Foundation has for some years taken the view that the relatively permissive attitude of government toward alcoholic beverage advertising is highly undesirable. While the results of studies of the impact of advertising, or different forms of advertising, on alcohol consumption have been either equivocal or negative, no research has yet attempted to deal with the crucial, and perhaps unanswerable, question of long-term impact: that is, the effect of growing up in a world where frequent exposure to alcohol advertising is inescapable.

In any event, it is important to recognize that control measures carry a message. The public has long accepted a governmental role in health protection and relevant legal constraints as a consequence. Accordingly, permissiveness in the alcohol area inevitably conveys the view that alcohol consumption is harmless or less harmful than once thought. In the case of advertising, a liberal policy carries the message that government considers it safe to permit greater attention to be drawn to the product. In addition, advertising commonly portrays alcohol use as a natural and desirable part of everyday life. Thus, increased social tolerance is doubly reinforced.



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A recent study\* of the trade journals of the brewing and wine industries in the United States has shown that "normalization" of their products is an explicit objective and that their share of the total beverage market has increased in recent years: "It appears that when alcohol industry executives talk about increasing their market share, they are thinking about the total beverage market, including water, soft drinks, juices, milk, coffee, tea, etc. The sellers of Riunite, a sweet, white wine marketed much like beer, put it plainly: 'Today we consider any liquid at all our competition. We are positioning ourselves like a soft drink.' (*Business Week*, March 15, 1982). In the U.S., alcoholic beverages have increased to 21% of the total beverage market by volume in 1978 from 15% in 1960, a share projected to rise to 25% by 1990 (*Impact*, January 15, 1979, October 15, 1979)." The extensive lifestyle advertising in Canada, particularly by the brewers, clearly implies a similar objective.

The Foundation believes that public health consequences should be a major consideration in formulating all alcohol control policies. At the same time, however, it will probably always be necessary to develop and

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\* McBride, R. Competition, Marketing, and Regulatory Issues in the Beer Industry. Paper presented at the 40th Conference of the National Council on Alcoholism, Detroit, 1984.



implement countermeasures specifically aimed at drinking driving. The remaining three conclusions relate to such countermeasures.

2. **The effectiveness of legislation prohibiting drinking driving is heavily dependent on the perceptions of drivers of the likelihood of being apprehended. These perceptions, in turn, are influenced by the actual degree of enforcement and the expectation of apprehension generated by complementary public information programs.**

The possibility that very severe penalties would reduce the frequency of drinking driving cannot be ruled out. However, such increases in severity as would be socially acceptable at present are likely to have little impact in the absence of heightened expectations of apprehension and conviction on the part of the drivers.\* The latter is probably best achieved through increasing

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\* A factor which may be in the process of altering acceptance in favor of more severe penalties and/or more stringent enforcement methods is the rise of highly vocal pressure groups comprising relatives of people killed or injured by drinking drivers. It has recently been suggested that the deliberate organization of such groups might be an effective route to social change (F. Klajner et al. *Prevention of Drunk Driving*. In: *Prevention of Alcohol Abuse*; P.M. Miller & T.D. Nirenberg (Eds.). New York: Plenum, 1984, p. 462 et seq.).



the effectiveness and efficiency of the enforcement apparatus combined with a vigorous public information program to draw attention to the activities involved. This effort might include, in particular, training programs for the police to improve their ability to identify drinking drivers, simplification of arrest, and adjudication procedures to increase the number of random roadside screenings and convictions.

There is little doubt that random roadside screening, if sufficiently intensive, is the most effective means available to increase driver expectation of apprehension and reduce drinking driving. However, it is probably not practicable, for both financial and political reasons, to sustain the required level indefinitely in order to achieve a lasting effect. The question, therefore, becomes: Are there acceptable ways to increase the actual and perceived probability of apprehension without a massive increase in the cost of enforcement? There are no unequivocal solutions to this problem in the research literature, but possibilities which merit investigation in regard to effectiveness, practicality, and acceptability are:

- (a) Prohibiting *all* drinking in connection with driving, i.e., a minimum blood alcohol level would not have to be demonstrated to secure a conviction. Clearly this would simplify both enforcement and adjudication; only qualitative test evidence of the presence of alcohol would be required;





- (b) Concentrating enforcement efforts where drinking drivers are most likely to be found, e.g., in the immediate vicinity of public drinking places;
- (c) Increasing the awareness of tavern operators and private hosts of their civil liability for damage caused by their intoxicated patrons or guests. Probably this would require, as a minimum, a deliberate communication program under the auspices of the Attorney General and the Liquor Licence Board of Ontario; and
- (d) Developing a simple alcohol testing device for installation in all motor vehicles. The driver would be required to activate the tester prior to driving. The result would be visible inside and outside the car, e.g., in the form of a red or green light, depending on the presence or absence of alcohol. Theoretically, this would eliminate the need for *random* roadside screening.

An important problem with countermeasures of this type is *a priori* rejection on grounds of social unacceptability. Accordingly, it would be advisable to determine the extent of public support for a more stringent approach to the problem through a province-wide survey. If such a survey were conducted under government auspices, it might well have educational



value in its own right, in that the importance of finding a solution would be emphasized.

- 3. Court referral of convicted drinking drivers to treatment or educational programs *when combined with legal sanctions* may reduce recidivism but is likely to have little impact on the overall prevalence of alcohol-related accidents.**

Studies of efforts to rehabilitate drinking drivers suggest that education and treatment programs may have beneficial effects on subsequent driving behavior. Positive changes in knowledge and attitudes have been found consistently, and a majority of the quasi-experimental and about half the experimental studies have also reported improvements in driving behavior. However, such programs have often been employed, in effect, as substitutes for legal sanctions: as bargaining tools to induce drivers to participate in the program. Current information indicates that this practice is probably undesirable. Legal sanctions have an important, positive impact on driving behavior, which might be increased by a rehabilitation program but which might not be achieved, or not to the same extent, by the program alone. *Therefore, the rehabilitation approach should be seen as a supplementary strategy and not as a replacement for legal sanctions.*



While the available evidence suggests that rehabilitation programs may have a beneficial impact on subsequent driving behavior, it is not possible to state with any certainty which types of program are most effective. This problem is compounded by the fact that the programs employed usually are not described in any detail. Furthermore, it is important to recognize that most programs do not appear to have been particularly successful in modifying lifestyle, probably the most significant indicator of an effective program.

Finally, rehabilitation programs, even if successful, cannot be expected to have more than a small effect on prevalence since the vast majority of those convicted in any given year are first offenders. Accordingly, further large-scale investment in this approach is probably not cost-effective and may divert attention and resources from promising, primary preventive efforts.

- 4. All measures that enhance road or vehicle safety in general and are likely to reduce the frequency or severity of traffic accidents deserve support, since such measures have the potential of similarly affecting alcohol-related accidents.**

In addition to approaches specifically focused on the drinking driver, the Foundation supports all measures that enhance road safety and are likely



to reduce the frequency or severity of accidents. These measures include, e.g., improved road design, mandatory safety devices such as seat belts and passive restraints, development of safer vehicles, programs to improve driving behavior, and stringent enforcement of traffic regulations.

### Summary

1. Measures which increase or decrease the overall level of alcohol consumption in the population are likely to similarly affect the prevalence of drinking driving.
2. To achieve a *lasting* reduction in the prevalence of alcohol problems, it will be necessary not only to increase public awareness of alcohol-related hazards but also to ensure that complementary changes in control policy occur: *educational efforts and control measures must be mutually reinforcing.*
3. Relaxation of licensing restrictions and other control measures increases the likelihood of drinking and driving.
4. From a public health perspective, alcohol control policy should take into account the probability that a permissive policy respecting the





advertising and promotion of alcoholic beverages will have an adverse effect, in the long term, on the prevalence of alcohol problems including drinking driving.

5. The effectiveness of legislation prohibiting drinking driving is heavily dependent on the perceptions of drivers of the likelihood of being apprehended. These perceptions, in turn, are influenced by the actual degree of enforcement and the expectation of apprehension generated by complementary public information programs.
  
6. Ways must be sought to increase the actual and perceived probability of apprehension without a massive increase in the cost of enforcement. There are no unequivocal solutions to this problem in the research literature, but some possibilities which merit investigation in regard to effectiveness, practicality, and acceptability are:
  - a. Prohibiting *all* drinking in connection with driving;
  
  - b. Concentrating enforcement efforts where drinking drivers are most likely to be found;



- c. Increasing the awareness of tavern operators and private hosts of their civil liability for damage caused by their intoxicated patrons or guests; and
  - d. Developing a simple alcohol testing device for installation in all motor vehicles. The driver would be required to activate the tester prior to driving. The result would be visible inside and outside the car.
7. Court referral of convicted drinking drivers to treatment or educational programs *when combined with legal sanctions* may reduce recidivism but is likely to have little impact on the overall prevalence of alcohol-related accidents.
8. All measures that enhance road or vehicle safety in general and are likely to reduce the frequency or severity of traffic accidents deserve support, since such measures have the potential of similarly affecting alcohol-related accidents.

